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CONFIRMATION NO. 4296

|  |   |                              |   |                                   |                            |
|--|---|------------------------------|---|-----------------------------------|----------------------------|
| SERIAL NUMBER<br>10/787,081  | FILING DATE<br>02/27/2004<br><br>RULE   | CLASS<br>310                 | GROUP ART UNIT<br>2834  | ATTORNEY<br>DOCKET NO.<br>AIHARA1 |                            |
| APPLICANTS<br><br>Kenshi Aihara, Yamanashi, JAPAN;<br><br>** CONTINUING DATA *****<br><br>** FOREIGN APPLICATIONS *****<br>JAPAN P2003-53355 02/28/2003<br><br>IF REQUIRED, FOREIGN FILING LICENSE GRANTED<br>** 05/14/2004  |   |                              |   |                                   |                            |
| Foreign Priority claimed<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance<br>Verified and Acknowledged |   | STATE OR<br>COUNTRY<br>JAPAN | SHEETS<br>DRAWING<br>4  | TOTAL<br>CLAIMS<br>9              | INDEPENDENT<br>CLAIMS<br>2 |
| ADDRESS<br>001444<br>BROWDY AND NEIMARK, P.L.L.C.<br>624 NINTH STREET, NW<br>SUITE 300<br>WASHINGTON , DC<br>20001-5303  |   |                              |   |                                   |                            |
| TITLE:<br>Vibrator and method for manufacturing the same   |   |                              |   |                                   |                            |
| FILING FEE<br><br>RECEIVED<br>770  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                              | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                   |                            |